

R&Q rederivation code: _____
Date Received: _____

Submission of Mice for Rederivation to Specific Pathogen Free (SPF) Status

(Please TYPE information in every blank. Use "NA" if not applicable. INCOMPLETE FORM MAY DELAY PROCESSING.)

This form must be submitted in conjunction with the Importation Request Form for animals from all Frederick off-campus sources.

Name of Principle Investigator :	
Contact Person in Laboratory:	
Animal Study Proposal Number:	Center number:
Laboratory:	Institute:
Telephone:	Fax:
Address:	
E-mail:	
Information on Mice (embryos or sperm) being submitted. Transgene name:	
Strain designation (dam):	Homozygous <input type="checkbox"/> Heterozygous <input type="checkbox"/> Unknown <input type="checkbox"/>
Strain designation (sire):	Homozygous <input type="checkbox"/> Heterozygous <input type="checkbox"/> Unknown <input type="checkbox"/>
Breeding scheme for rederivation:	
male (Homo <input type="checkbox"/> Hetero <input type="checkbox"/> Wt <input type="checkbox"/>) X female (Homo <input type="checkbox"/> Hetero <input type="checkbox"/> Wt <input type="checkbox"/>)	
Designation of wild-type (wt) if used for rederivation: FVB/N <input type="checkbox"/> , C57Bl/6 <input type="checkbox"/> , other	
Special housing considerations:	
Tg+ characteristics (color, size, breedability, etc):	
Comments:	
Current location of colony:	Mice currently available: Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact person and Title:	Telephone:
Receiving Animal Facility:	Telephone:
Contact person and Title:	

The principle investigator requesting this service must agree to operate in accordance with the NIH Guide for the Care and Use of Laboratory Animals, (ISBN 0-309-05377-3), revised 1996 (a copy is available from the LASP office).
I so acknowledge this responsibility.

(Signature, Principal Investigator)
electronic mailing directly from the Principal Investigator is acceptable as a signature

(Date)